LOUISVILLE MEDICAL NEWS

A WEEKLY JOURNAL OF MEDICINE AND SURGERY.

EDITED BY

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WILLIAM H. GALT, M. D.

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ANNOUNCEMENT.

HE LOUISVILLE MEDICAL NEWS will be issued every Saturday, in appearance equal to the present number. It will contain Original Articles upon Practical Medicine and the several specialties of the art, Selections from Home and Foreign Journals, Items of News in the profession, Correspondence, Reviews of Books, and Editorials upon current topics.

The columns of this journal are open to a free discussion upon questions of professional interest, and contributions are invited from all parts of the country upon matters pertaining to the profession of Medicine, its practice, conduct, and government, and upon medical instruction.

The editors are not responsible for the views of contributors; and contributors are not asked to be

responsible for the views of the editors.

This journal undertakes to defend what it considers the right, and to expose shams. In doing so it will strive to avoid all personalities; but when it deems it necessary will not hesitate to discuss principles and systems, by whomsoever they may be advocated. It offers itself as an organ of the profession and appeals to the profession for support.

BUSINESS NOTICES.—Letters pertaining to the business of the journal should be addressed to its publishers, John P. Morton & Co.

Contributions and correspondence upon matters concerning the columns of the journal may be sent to

either of the editors. Contributors will please write plainly, concisely, and with ink.

The extremely low price of this journal, \$2.10 per annum, which includes postage, renders it necessary to collect dues closely to prevent a loss. Subscribers will therefore please observe the printed terms and inclose the necessary amount with their names.

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LOUISVILLE MEDICAL NEWS.

"NEC TENUI PENNA."

Vol. II.

LOUISVILLE, JULY 8, 1876.

No. 2.

AMERICAN MEDICAL ASSOCIATION.

At the late meeting of the American Medical Association the retiring president, in his farewell speech, remarking upon the session which was about closing, said that much future progress in medical science would be traced to this meeting in Philadelphia. We believe he was right, but hardly in the sense which he intended. The association has shown its utter incapacity to deal with the great abuses in the profession, and we must look elsewhere for redress. It dare not strike at charlatans within its jurisdiction, else perhaps its revenues and support might be somewhat affected. We can see no other reason for its timidity. Certainly the most vital question before the profession just now is the state of the schools. If it has been harped on until men grow sick of hearing it, it is because the evil grows yearly worse and worse. When the Victoria Association asked for a list of recognized schools in this country, a bomb-shell in the convention would not have caused more commotion. It will perhaps never be known what disposition was made of the communication; but even if it has been referred to the Judicial Council, there is little hopes of its seeing the light of day again, if this committee reflect at all the spirit of the late meeting. We had hoped for better things, not more for the good of the schools than of the association. The backbone of the association refuses to be stiffened. We fear that it has none left to stiffen. For some time past its Transactions have given rise to serious apprehensions as to the state of its brains. The vague sentiment which has been prevalent that in its manly bosom was deposited the Code of Ethics, which it was the delightful province of its strong arm to protect, has been dispelled by the declaration of its president that the Code of Ethics is dead; and a serious question arises, What has the association left? No backbone, no brains, no manly bosom, no strong arms! Has it legs and stomach only? Does it stalk the continent simply to get good grub? This is something to live for, to be sure; but there is something beyond which is desirable; and even upon the general question of bread and meat, unless something is done to stop the flood let loose upon the profession, there will soon be sore distress.

The association has virtually declared it has nothing to do with the schools. Can we get redress elsewhere? We believe that a tribunal has at length been established competent to judge and act upon educational questions, and this is in

THE ASSOCIATION OF THE SCHOOLS.

We published in our last number the report of this convention of medical colleges, which was held in Philadelphia June 2d and 3d. We confess that upon first reading the report—in common with many of our readers, no doubt—we were somewhat disappointed at the results obtained. From a further study of the subject, and information received as to the spirit which characterized the meeting, we are convinced that a real and substantial victory over ignorance and cupidity and sham has been achieved. The convention merely kept its temper better than we could have done, and embodied its resolutions in quieter, but none the less meaning phrase.

Out of the fifty medical schools of the

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country, great and small, twenty-three were represented by delegations and nine by letters. Several of the colleges which were not represented by delegation or letter were prevented from doing so by the shortness of the time between the call and the assembling of the convention for obtaining the necessary faculty action. It is known that they approved of the convention; in fact, it may be truly said that never was a convention more representative in its character.

The unanimity of feeling and expression in the convention was surprising; with the exception of a few recusants who well know that their ill deeds can not but be condemned by an enlightened jury, there was not a dissenting voice upon the necessity of reform and the protection not only of the colleges, but of the profession at large from most serious abuses.

Let not the evil-doers take false hope that they will go unscathed from the fact that the convention referred its acts back to the several faculties represented for indorsement. There is no doubt of the support the representation will get at home. In the nature of things the convention could not in its first meeting do more than it has done. The question was sprung upon the schools too suddenly to obtain the necessary action of the faculties in time, and even if this had not been the case it was ordinary prudence to test the temper of such a convention as was called before commitment. When it met it was found that the great majority of the schools were a unit in thought and that a permanent association of the colleges could be a success. The most important work done was to provide for this. A plan of association with constitution and by-laws is in committee, and when these are adopted, as they will be at the next meeting of the convention, the Association of American Medical Colleges will enter fairly upon its useful and honorable career.

Some abuses were so flagrant that the convention deemed it best to deal with them at once. It accordingly condemned the wholesale debauchery of the so-called beneficiary

scholarships, the holding of two graduating classes in one year, and the invitation to nine-months' graduates. It will deal with other questions of reform in good time. Let not those who defend these degrading practices comfort themselves with the thought that the Association of the Colleges can make no sanction to its laws. One of the great sources of supply in the patent institutions is from men who seek their easy paths with the hope of getting their tickets or degrees indorsed elsewhere. Let an ad eundem list of colleges be agreed upon by the Association—this is foreshadowed—and men will be more careful where they go. We do hope that those who by their present action are placing themselves under the ban will mend their ways and avoid the condemnation they must otherwise meet.

Original.

SPINAL DISEASE.

BY LUNSFORD P. YANDELL, JR., M. D.,

Professor of Therapeutics and Clinical Medicine in the

University of Louisville.

Though usually claimed by the surgeons as a disease belonging to their domain, it is of the first importance to the physician that he be acquainted with and bear in mind the earlier symptoms of this sad disease. Believing that an ample knowledge of the subject is by no means universal with practitioners, I venture to offer the following hints. A brief narrative of some of the cases that have lately fallen under my observation will probably convey as clearly my meaning as could a long dissertation.

Case I. A beautiful child of 8 years, a vivid, vigorous, rosy-cheeked girl, a very picture of health, began last fall to be frequently harassed by a cough, spasmodic, violent, almost without expectoration, and usually occurring at bed-time. A careful and minute examination failed to reveal the cause of cough. Antiperiodics, antispasmodics, and all probable remedies failed

to remove the complaint. Anæsthetics and anodynes gave temporary relief. Had I thought to examine the spine at this time it is probable I should have discovered there the cause of the cough. After some months the cough passed away. This spring, while still in apparently perfect vigor and full of life, the child complained of being tired on rising in the morning, and occasionally of pains in her lower limbs, chiefly the right. In a week or such a matter, running became painful, and after a little while her lameness forced her to relinquish all outdoor plays, and very soon walking was almost entirely given up. Being called, I discovered spinal curvature and tenderness on pressure. Next day Dr. D. W. Yandell applied the plaster of Paris dressing or "plaster jacket," and on the following day the little girl came bouncing down the stairs to greet me when I called. All pain and lameness had totally vanished, and she was repossessed of her buoyancy of spirit and activity of limb. Appropriate internal treatment of course was ordered.

Case II. A young gentleman aged 21, of Indiana, for some time under my care for pulmonary trouble, wrote me he had gotten a bad pain in his right leg, was restless, his sleep unrefreshing, appetite gone, and he was wretched. Early in life he had spinal disease, which was long since well, and he has for several years had a hip trouble. my request he came to Louisville, having previously tried without benefit many remedies. At 7 o'clock P. M. the surgeon who managed the first case applied to this one the plaster jacket. The result was a capital good night's sleep to the patient, hearty appetite next morning, and he has gotten on beautifully since.

CASE III. A little girl 4½ years old, of extraordinary attractiveness, comely, amiable, affectionate, and brim-full of life, got a decided case of mumps. Closely following the parotitis came measles. This was of average duration, and the convalescence presented nothing unusual. Added to these maladies intermittent fever soon attacked

the child, and after a few weeks hectic was observed. From having been docile and cheerful the patient became moody and capricious in temper, giving way to violent paroxysms of rage. All noises, the presence of her playmates, the attentions of her older relatives, annoyed and vexed her. Uncertain appetite, sleepless and restless nights, cough, pain in stomach, vaginal discharge, and general tenderness, with emaciation and exhaustion, followed; and in this condition I found her when I visited her in a neighboring state ten days since. Examination revealed spinal curvature, with active inflammation evidently in progress. The temperature ranged from 102° to 103°. Thoroughly stuffed with tubercle as the little sufferer was, and the grave being the only possible termination to her troubles, of course surgical interference was out of the question.

The most interesting point in this case is one related to me by the parents. Months before the incursion of the fevers previously mentioned the little girl was often observed to come in from her play, and, resting her hands on a window-sill or on the arms of a chair, she would draw her feet from the ground, thus suspending the weight of her body on her shoulders. At other times she pressed her hands heavily on her hips, stretching her body upward. At this time she was becoming more grave and serious. Her parents regarded these movements as merely an odd habit. Had they called their medical attendant's attention to the child's actions it is probable he would have suspected the spinal difficulty, these singular actions being an effort to take the pressure off the spinal cord. Inspection and manipulation would have secured the correct verdict. The plaster dressing at this stage would have given comfort, although the final result, under the circumstances detailed, could scarcely have been averted.

I might enumerate other cases, but these suffice for the illustration of my purpose, and they also teach the great necessity of looking behind symptoms to find their cause. Instead of treating cough, neuralgia, gas-

tralgia, lassitude, irritability of temper, and so forth, ferret out the origin of these symptoms, and to that address your treatment.

LOUISVILLE.

ACUTE RHEUMATISM.

BY W. B. MEANY, M. D.

Called to see Andrew — May 8th, aged 18. States that previous to present attack had always enjoyed good health. Had been lately subjected to much fatigue in his occupation, being a tobacco-stemmer. Has been exposed to sudden transition from a hot room, having a fire in same, to a raw, cold atmosphere, in succession during the day, and while in this room being almost continually bathed in a profuse perspiration, his business being such as to require his immediate presence out doors, causing, in all probability, this attack. Prescribed potassa bicarb. gr. xx every hour in water. Found him suffering excruciating pains in joints. Ordered a mixture of chloral and bromide potash; also directed him to have a hop poultice to be kept continually applied to joints.

May 9th: found no improvement. By examination found him suffering with heart lesions; pulse 84, full and strong; no cough, but some dyspnæa on making exertion; slight tinnitus aurium and dimness of vision occasionally. I now ordered potassa nitras gr. xx every hour, omitting the bicarbonate. Find patient has irregular paroxysms of a copious, clammy perspiration; acid smell; urine scanty, dark color; deposits of crystals and mucus; tongue loaded; anorexia; thirst; bowels constipated. Ordered a full dose of sal Rochelle; also pulv. aromat. gr. v, pulv. ipecac comp. gr. x, to be taken at night. Continue nit. potash.

May 10th: found patient complaining of pain in great toe. Ordered vin. colch. sem. gtt. xv every two hours. Called late at night; found patient suffering less, with entire absence of pain in great toe; discontinued vin. colch. sem. Urine now voided of normal color and in healthy quantity;

had two operations of bowels. Continue nit. potash and the chloral and bromide of potassa when pain is severe. Complains of great thirst. Ordered strong lemonade to be given *ad libitum*.

May 11th: found patient convalescing rapidly; can move his limbs without pain; appetite is now good. Continue same treatment.

May 12th: found patient perfectly well, with the exception of some slight stiffening in joints. Continue nit. potash every two hours.

May 13th: Found patient getting ready to return to his business. Discharged cured.

No return up to present date.

This case was under potash treatment four days. We thought it well in these salicylic acid times to report a successful case treated in the old way.

HERNIA.

BY T. J. LYNCH, M. D.

The following is the history of a case of strangulated inguinal hernia, successfully treated by the postural method:

M., a negro fireman at a steam-gin, had been suffering from a right oblique inguinal hernia, for which he wore no truss. He was suddenly seized with violent symptoms of strangulation at 8 o'clock A. M., November 20th, 1875, while at his post. When observed by his employer he was in a state of semi-unconsciousness, produced by pain and cold. He was at once removed to his home, and the usual means used by the nonprofessional for reduction were brought to bear in his case in vain. I was sent for at a distance of five miles at 5 o'clock P. M. On arrival I at once administered chloroform to complete relaxation. I then endeavored to reduce by taxis, in vain. I then plunged the patient into a hot bath to secure more profound relaxation, and as a last resort I extracted a large quantity of blood from the arm, followed by a large dose of opium, using taxis and continuous manipulation as long as I deemed it safe.

There seemed to be no other alternative than an operation; but knowing the fearful death rate following this operation, I cast about for other expedients that might avert my patient's impending doom. I thought of a case reported by Dr. Erich, and at once decided to give it a trial in this instance. I ordered some short plank to be placed and secured in such a position that they would form an inclined plane at an angle of about 45° with the floor. These boards were covered with some articles of bed-clothing, the patient placed upon this inclined plane, his head resting on a pillow on the floor. I then ordered cold applications to the external ring and tumor, and in less than two hours my patient was perfectly relieved.

CARROLL'S PRAIRIE, TEXAS.

Correspondence.

ARREST OF DEVELOPMENT.

In December last I was called to see a Mrs. M. Found her in labor, and was informed by the midwife that she had been in labor for about six hours. The nurse also informed me that the os was dilated sufficiently to admit three fingers, but she was unable to tell what portion of the child presented.

Having this history of the case, I made a digital examination, and found a soft, pliable tumor engaged in the os. The waters not having escaped, and as nothing hard posterior to the membranes could be felt, and the os sufficiently dilated, I thought it advisable to rupture the membranes in order to find what I had to deal with. After the waters had escaped I administered half a tablespoonful of fluid extract of ergot, which brought on pains a little better. A digital examination now revealed a soft mass engaged in the os, and toward the right sacroiliac junction I found a hard, thin, serrated substance. I now diagnosed it a head presentation with arrest of development of the bones of the head.

But the labor was tedious and pains not sufficient to expel the child; and as she had been in labor about ten hours, and the os being well dilated, I applied the forceps and delivered her of a living child. The child was at term, and well developed in every portion of the body, with the exception of the cranium. There was only partial development of the frontal, occipital, and temporal bones, and an entire absence of the parietal bones. The child lived for several days.

C. J. RADEMAKER.

LOUISVILLE.

PHARMACEUTICAL NOTES.

AROMATIC TOOTH-WASH.—Take of myrrh (pure tears), contused, \$\mathcal{z}\mathcal{j}\$; Florentine orris (ground), \$\mathcal{z}\mathcal{i}\mathcal{j}\$; soap bark (ground), \$\mathcal{z}\mathcal{i}\mathcal{v}\$; red rose-leaves, \$\mathcal{z}\mathcal{j}\$; dil. alcohol, O ij. M. Prepare as tincture.

DR. McBride's King of Pain (Quack).— Take of gum camphor, chloroform, spirits turpentine, balsam fir (Canada), each thiss; tinct. capsicum, thij; opium, catechu, and guaiac, each thiss; oil of sassafras, wintergreen, each thij; oil of horsemint, thij; aqua ammonia, thij; ether sulphuric, thiss; oil of origanum, thiss; fl. ext. cotton root, fl. ext. poke, fl. ex. buchu, each thij; alcohol, g. xv.

Depilatory Powder.—Take of quicklime parts xxx; orpiment, parts iv; powd. acacia, parts lx. M. Keep well closed in stoppered bottles; form paste with a little water; apply to hair five or ten minutes; remove with the back of knife.

AN ELEGANT AND CHEAP TOOTH-WASH.— Take of calc. carb. precip., thiv; aquæ, cong. ij et Oj. Mix, and strain through a wire or gauze strainer. Add tinct. myrrh, cong. ss; ol. gaultheria, 3 iss. M.

SHAMPOO LIQUID.—Take of potassæ carb., 3j; ammonia carb., 3s; aquæ, Ovi; spirits vini rect., Oj; tinct. cantharides, 3s; spirits myrciæ, Oj. Put into eight-ounce bottles.

Louisville. W. B. MEANY, M. D.

An Opening.—Irwin County, Georgia, does not contain a single physician.

Selections.

ON THE MEDICAL AND DIETETIC TREATMENT BEST ADAPTED TO THE PHYSICAL RESTORATION OF CONFIRMED INEBRIATES.—Robert P. Harris, M. D., Attending Physician to the Franklin Reformatory Home, Philadelphia (American Journal of Medical Sciences), says:

"We do not propose in this article to enter upon the treatment of any of the serious chronic organic diseases which result from the long-continued use of alcoholic stimulants, but simply those direct conditions of disease which we are all liable to be called upon at any time to remedy in the debauchee, made sick by over-indulgence, whether of a few days, weeks, or months, or it may be of a much longer period. Few drunkards are regularly periodical or continuously habitual; most of those we are called upon to treat being alternately moderate and excessive, or abstinent and again immoderate.

"The diseased conditions referred to are vomiting, inordinate thirst, diarrhea, hemorrhage from the rectum, epileptic convulsions, nervous tremors, morbid wakefulness, delusions of sight or hearing, or both, and maniacal attacks. Physicians in both private and public practice are called upon to administer to their relief, and, if possible, restore them to sound health; often only, it is true, that they may be ready in a few days or weeks to resume their old habits—a very unthankful position, but one which may occasionally enable us not only to save the life of the patient, but put him in a position to reform his habits and become a useful member of society, instead of being a curse to it and his family.

"The opinion was long held by physicians, and still is by many whose experience has not led them to change their views and practice, that there is very great danger to the inebriate in suddenly cutting off all his customary stimulus, and that mania is almost sure to follow such a practice when the party has been drinking steadily and largely for a long time. Hence, to avoid this presumed danger, the system known as the 'tapering off' was adopted, and is still adhered to by many; that is, to gradually diminish the amount of stimulus, day after day, until it is believed safe to stop it altogether. We have faithfully tried this plan, as well as the 'sudden-stoppage system,' and are firmly convinced that the latter has every advantage over the former, and especially in the cases where according to the old theory there should be the greatest risk.

"During the last three and a half years we have had under our care at the Franklin Reformatory Home for Inebriates more than five hundred men who were confirmed drunkards—a few of them being periodical, but most of them what are called habitual. With but

a very small exceptional fraction, these men drank whisky, and on an average of one and a half pints daily. Some drank as high as half a gallon for a short period, and a few strong subjects were able to consume a quart regularly every day for a year or more. With the great majority of men the period of a debauch is limited by the ability of the stomach to endure the gradual production of alcoholic intolerance, amounting finally to absolute rejection of all fluids and solids from this viscus, accompanied in many cases by an exhausting diarrhea, and in a few by epileptic convulsions or hemorrhage from the rectum. This condition finally forces the party to break off his habit for the time, and in some instances to go to bed and seek medical advice.

"We find such patients weak, nervous, and excessively thirsty, inclined to emesis under the least provocation, and in many cases reduced in flesh considerably. Such subjects—and especially when the habit has been indulged in several months prior to the time when medical aid is summoned—are in our experience those most liable to terminate in maniacal attacks; and these sometimes of an asthenic type, with a scarcely perceptible pulse, and tending, unless arrested, to coma and death. In such cases there is certainly no question as to the propriety or impropriety of the tapering system, for nature herself decides the matter in the fact that the stomach rebels against almost every thing, and especially stimulants, water, and solid diet.

"The indications are plain in these cases. We are to settle the stomach, quiet nervousness, nourish the patient, and induce sleep; all of which must be accomplished, if possible (and the instances where they can not are exceptional), within twenty-four or, at the most, forty-eight hours. If the patient has diarrhea or hemorrhage from the rectum, these must also be checked; and this may be said of any other condition of an exhausting character. The danger of mania arises from the fact that the party has been over-stimulated, while at the same time his nutrition has not been properly kept up.

"A careful comparison of cases satisfies us that the reason why many men who drink alcoholic liquors largely for years escape maniacal attacks, while others in less time, and upon a smaller quantity, are seized with them, is that the former are seldom, if ever, troubled with attacks of vomiting, and keep up their nutrition to an average degree, while the latter gradually lose their appetites, until finally they present themselves for medical treatment after an entire abstinence from food of three or four days.

"Some inebriates, after abstaining for some weeks or months and again returning to their habit, commence with such excess that their appetite fails at once, and health and strength also in a few days. We have seen the pulse in one instance brought down to forty beats per minute in three days, and flesh reduced in another case ten and a half pounds in six; the latter party having been able to eat only about five meals in this period. This man was in sound health, and had not been drinking for six months before the debauch in question, simply because he was a prisoner in the House of Correction, and could not get it. On the day of his discharge he weighed one hundred and fifty-one and a half pounds, and when I weighed him, six days later, he was reduced to one hundred and forty-one. We have heard much of the value of alcohol as food, of its preventing the waste of tissues, etc.; but this case does not argue well for its ability as a nutrient either directly or indirectly. We have frequently added from twenty to forty pounds to the weight of an inebriate in a short time after he had ceased to use whisky; and have even seen this amount of improvement in two cases of incipient phthisis, with frequent hemororrhages, one of whom now weighs one hundred and eighty pounds, although he still coughs a little. A gain of nine pounds in a week is the best we have upon reliable record, although more than this has been claimed.

"It is not to be wondered at that cases of physical depression following the use of alcohol, and of defective nutrition due to failure of appetite, should become affected with mania à potu, unless very carefully treated in a way to restore physical strength at as early a date as possible. The management of such cases is somewhat more difficult in private practice than in a public institution provided with strong rooms, but the medical treatment should be the same in either case. If there is vomiting, the patient is usually much benefited by the use of lime-water and milk, one teaspoonful of the former to two or three of the latter, with a small piece of ice given at intervals of fifteen minutes for about two hours. If this fails, then a large mustard-plaster should be applied over the abdomen, and the remedy just named repeated. If the irritability continues, opium is often of service, or bromide of sodium in combination with bicarbonate of soda, fifteen grains of the former to ten of the latter, in spearmint water. As soon as the stomach will bear it, beef-tea should be given at short intervals, commencing with a tablespoonful and increasing gradually to a teacupful at a time. This should be prepared by the warm maceration process of Liebig, and seasoned with black pepper, salt, and a small pinch of ground cloves. Chicken-water will sometimes be borne more readily than the beef-tea, and may be given as an intermediate step or in preparation for the latter. From fluids we may soon pass to solids, such as eggs, toast, mutton-chops, etc.; for it is not uncommon for a patient to vomit in the morning, eat a little at dinner, and quite ravenously at tea.

"Bromide of potassium is next to be employed as a sedative and soporific, and especially if there be any danger of mania à potu. In these cases we have generally given twenty grains in a tablespoonful of spearmint water every hour or two, according to urgency; and have in one or two instances of mania administered as high as 1,200 grains in three days. This remedy not only induces sound, healthful, restoring sleep, often wonderful in its results, but in some subjects removes all craving for alcoholic stimulants after a few doses have been taken. It also in some cases helps to remove the irritability of the stomach, and no doubt diminishes its hyperæmic condition by its action upon the capillary circulation. The bromide of sodium will perhaps prove a better remedy when it comes to be more fully tested. It is fifty per cent more soluble, is more purely saline to the taste, and entirely free from pungency. Although a fluid dram of water will dissolve forty grains of bromide of potassium and sixty of bromide of sodium, we believe it much better to administer both salts in weak solution, making the dose a tablespoonful, and giving the patient but very little additional water in the way of drink, except what he gets in his beef-tea and other diet. The equivalent of bromine in the latter salt reduces the dose about one sixth. The bromide of lithium is much stronger as a hypnotic than either salt, being nearly one half more active than the bromide of potassium. Its high price prevents it as yet coming into more general use. The bromide of ammonium we have also used, especially in rheumatic and gouty cases; but its pungent ammoniacal taste renders it more unpalatable than either of the other salts.

"Sulphate of morphia is a good adjuvant to the salts of bromine as a soporific where these fail in producing an early effect, and is best given at night, the dose being one quarter of a grain, repeated three or four times at intervals of an hour. Tannin generally soon arrests the diarrhea. If there is pain, opium should be added; and if the disease should prove obstinate after a few trials, acetate of lead will be found a more effective astringent. The object of treatment should be to produce an impression in the shortest possible time, so that food may be taken safely, and the patient receive the great benefit that it and sleep are capable of exerting in his case.

"Two things are to be specially avoided in treatment—viz., the use of tobacco in any form, and that of water, except in very limited quantities. We have seen maniacal attacks of a violent character resembling ordinary acute mania follow an excessive use of tobacco after the patients appeared to have passed all danger of mania à potu. The thirst of a convalescent debauchee is frequently so great that water will be swallowed till the stomach is forced to reject it, without the craving being at all satisfied, thereby

producing prostration of system, intolerance of food, and danger of mania from arrest of proper restorative treatment. Hyperæmia, hyperæsthesia, alcoholic gastritis, and in some rare cases perhaps ulceration of the stomach exist, so that it is impossible for it to retain either fluids or solids except in minute quantities. If water allayed the inordinate thirst, there might be some excuse for giving it; but experience teaches that it does not, and that it is capable of prolonging the period of gastric irritability. Even where water is only given as a menstruum, it is sufficient to supply the real demands of the system, and the craving for it often leaves in from twenty-four to forty-eight hours. A simple statement of the reasons for withholding water we have always found to secure the co-operation of the patient when in a condition to listen to reason."

AERATED WATERS.—G. Dubelle, Ph. D., contributes to the Druggists' Circular the following article on this subject:

"The preservation of health is the great question of the day. Many means are suggested by which the spread of disease may be prevented; but sanitary engineering, and all the other arrangements which town authorities are called upon to make, will not materially reduce the death-rate unless the people are more careful in their eating and drinking.

"We are accustomed to see cart-loads of aerated waters, lemonade, ginger-ale, etc., left at hotels, barrooms, and private residences. The consumption of these liquids is enormous; and if the evils accruing from the system could be accurately ascertained and exposed, it would form a frightful cause of death. I have analyzed a sample of ordinary soda-water taken from a fountain, and must say that it is at least highly dangerous, for it contains more than two to three grains of lead dissolved in every gallon. Ginger-ale is even worse, while lemonade is hardly ever free from the poisonous influence of lead. People who are in the habit of drinking such preparations will do well to adopt the following well-approved formulas for making wholesome and agreeable summer beverages without a machine:

"Plain Soda Powder.—Powd. bicarbonate of soda, 8 ounces; powd. citric acid, 6½ ounces. Mix the powders, recently dried, in a warm mortar, and immediately put the mixture into a dry bottle, and cork securely. For use, put one teaspoonful into a glass of water, and stir it until dissolved. By adding a dessert-spoonful of raspberry, strawberry, or vanilla syrup, any kinds of soda-water can be produced, such as are dispensed by druggists and others.

"Plain Messina Lemonade Powder.—Powd. white sugar, 7 pounds; powd. citric acid, 4 ounces; concentrated essence of lemon, 4 drams. Mixed and used as before.

"Plain Seville Orangeade Powder.—Powd. white sugar, 7 pounds; powd. citric acid, $3\frac{1}{2}$ ounces; conc. essence of orange, 3 drams; conc. essence of cedrat, 1 dram. Mixed and used as before.

"Aerated Messina Lemonade Powder.—Powdered double refined sugar, 14 ounces; powd. bicarbonate of soda, $3\frac{1}{2}$ ounces; powd. citric acid, $4\frac{1}{2}$ ounces; conc. essence of lemon, 60 drops. The powders must all be separately and carefully dried, at a moderate temperature before mixing, and when mixed be carefully secured from the air. A dessert-spoonful will make a tumbler of lemonade.

"Aerated Seville Orangeade Powder.—Powdered double refined sugar, $14\frac{1}{2}$ ounces; powd. bicarbonate of soda, $3\frac{1}{2}$ ounces; powd. citric acid, 4 ounces; conc. essence of orange, 60 drops; conc. essence of cedrat, 12 drops. Mixed and used as before.

"Belfast Ginger-ale Powder.—Powdered double refined sugar, 16 ounces; powd. bicarbonate of soda, 3½ ounces; powd. citric acid, 4½ ounces; conc. essence of ginger, 1½ ounces; conc. essence of cayenne, 4 drams; conc. essence of lemon, 40 drops. The soda, acid, and sugar must be very carefully dried, separately, and at a temperature not exceeding 120°. Before drying the sugar the same must be thoroughly incorporated with the essences, to which a small quantity of caromel, as coloring, may be added. Used as before.

"Manhattan Spruce-beer Powder.—Powd. double refined sugar, 16½ ounces; powd. bicarbonate of soda, 3½ ounces; powd. citric acid, 4 ounces; conc. essence of spruce, I ounce. Mixed and used as before."

BILLROTH ON TRANSFUSION.—Billroth, who is not in favor of transfusion, has published several cases in which it has not been followed by any real benefit. He is decidedly opposed to its employment in patients suffering from chronic diseases; and even in acute anæmia, in which, according to some, it restores life almost miraculously, he has seldom seen it of any use. He has reported two cases of transfusion of his own, the second being of such interest as to be given in full.

G. R., female cook, aged twenty-nine, was admitted September 23d, 1875, on account of an enormous osteo-chondroma which grew from the left side of the pelvis. The disease began two years ago, and at present a hard resisting tumor about the size of a man's head is attached to the horizontal ramus of the pubes, and so fills the pelvis as to cause extreme difficulty in emptying the bladder and bowels. It was decided to perform resection of the horizontal ramus of the pubes, and in this way to entirely remove the disease. Pus having a bad odor was being continually discharged from the vagina—a circumstance which led to the operation, as without it there was no hope.

On November 22d the patient was put under chloroform, and after compression of the abdominal aorta that portion of the tumor outside the pelvis was removed, then the horizontal and part of the descending rami of the pubes were also removed. It was found, however, that the base of the tumor extended along the inner side of the pelvis; but after a good deal of trouble the whole of it was removed, and the cavity was tamponned. In spite of the compression on the aorta, the patient had lost a good deal of blood. During the operation the four extremities were bound with elastic bandages, notwithstanding which, however, the patient passed immediately into a state of collapse. Her head was then lowered to such an extent as to almost touch the floor, when she revived at once, although before her pulse could not be felt and she had ceased breathing. The patient was kept in this position for about an hour, when, although she had somewhat recovered, she was still so weak from the absolute loss of blood that it was not possible for her to exist until new blood was made. Billroth then determined, almost against his will, to try transfusion. The brachial artery was then opened and three ounces of defibrinated blood was injected into it. During the preparations the patient felt some pain and spoke a few words. During the operation the respiration and heart's action ceased. The patient was dead.

The post mortem revealed the left side of the heart empty, while the right side was filled with blood, as also were the lungs. Billroth's impression was that the transfusion was the immediate cause of death.—Die Medicinische-Chirurgische Rundschau (extracted from Canada Journal).

[It strikes us if transfusion could have served the above case the grave would be a failure.]

REDUCTION OF PARAPHIMOSIS.—Alfred Eddowes, M.B. & C.M. (British Medical Journal), says: "For the last two years I have been in the habit of reducing paraphimosis by the following plan: Take a strip of wet lint about an inch or two inches wide, and envelop the glans and œdematous prepuce in it, allowing the lint to reach in front of the glans; then take a piece of elastic, the best being the ordinary round elastic ligature, and commence winding it round the glans from before backward. Adjusting the elastic evenly and firmly is easily managed, if the lint be allowed to reach beyond the glans in front, so as to give a starting-point for the elastic to catch hold of. If the swelling be very great, it is better to apply the elastic lightly at first, allow it to do its work, then pull it rapidly off and reapply it more firmly. By this precaution all unnecessary pain is avoided, though a little more time is required. The great and even pressure of the turns of elastic very soon reduces the swelling. If the elastic and lint be quickly removed,

the glans will be found shriveled up, and the prepuce readily passes over it. I have been induced to draw attention to this plan of reducing paraphimosis by those who have seen me employ it."

SUBCUTANEOUS DIVISION OF THE FEMUR. -- On May 16, 1876, Mr. Richard Davy divided the femur subcutaneously (after Langenbeck's method on the tibia) for bony ankylosis of the ileo-femoral joint in a boy aged fourteen. The right femur was flexed on the abdomen at an angle of ninety degrees, the angle being measured at the anterior superior spine of the ilium; the femur was also adducted, so that the legs crossed; the genitals were partially eclipsed, and the right inguinal fold deepened. A small cut was made down to the anterior plane of the femur, immediately below the trochanters. The commencing shaft was drilled through, and through this opening a key-hole saw almost effected division of the femur by right and left movements. Complete division was caused by periosteal fracture. The limb was at once abducted, straightened, and placed symmetrically; correct position was maintained by splint and sand-bags. The young fellow progresses without an unfavorable symptom, and bony union in the reformed attitude is being accomplished by nature.—British Medical Journal.

TETANUS CURED BY MECHANICAL MEANS.—Dr. Calastre (Gazette Medic. Lombarda, No. 27) relates that a patient convalescing from several attacks of hemorrhage of the skin and mucous membranes was attacked with partial tetanus, probably of traumatic origin, following a wound in the sole of the right foot. The tetanic symptoms were characterized by rigidity of the muscles of the cervical region and of those of mastication. Quinine and chloral were given with indifferent results. The author then, considering that the tetanus was localized in the abovenamed muscles so that the patient could only be imperfectly nourished, overcame the stiffness of the neck by forcible movements of flexion, rotation, and extension, as far as voluntary movements were possible. He then separated the jaws by degrees, and from day to day the opening enlarged, and the patient could attempt to eat solid food. This treatment lasted about a month (August), and in the autumn the cure was complete.

THE TREATMENT OF CHRONIC TORTICOLLIS.—M. Gubler, in a communication to the Society of Therapeutics, takes a different view to that usually held as to the nature of chronic torticollis, and considers this disease in the majority of cases as the result not of muscular spasm, but rather of a cervical arthritis situated principally in the lateral articulation of the cervical vertebræ. If the patient inclines the head toward one or the other shoulder, it is by a voluntary

action of his muscles for the purpose of immobilizing the diseased vertebral articulations. Frequently then (and in this opinion M.M. Dally and Cadet de Gassicourt agree) we ought to treat the arthritis, and not the muscular affection, which either does not exist or else has not the importance generally attached to it. Paris Médical.

Miscellany.

SMALL-POX EXTERMINATORS.—The Cincinnati Lancet is responsible for publishing the following correspondence received by the mayor and Board of Health of the Queen City. We commend it to the notice of the Phenomenon's organ, which does not think that medicine should be trammeled by the tyranny of grammar: "Letter No. 1, directed 'To the Bord of helth of Cincinnati, Ohio: ' 'Emirson Station, Knox County, Ind. Gents-Sir: Having read in the paper that the smal-pox is bad in your city, I wish to inform you that I can cure them in every case if I can git the medison to them before the cups fills. Now, if the Bord of health will give me a permit I will come, if not, send me four cents, and I will send you enough medison to cure one, with directions, then, if you like, you can have a dozent or a gross sent to you. i will inshure the cure. This is no humbug. Try it on one, and you will send for one hundred bottles. The cure is perfect in twelve hours. Pleas and answer this, in hast. Address — Emirson Station, Knox Co., Ind. This is confedensal.' Read and ponder over this verbatim copy. Here is a young man of talent wasting his sweetness on the desert air of Indiana! The Board of Health cruelly declined to pay any attention to the letter. Letter No. 2, directed 'To the Mayor of Cincinnati:' 'Cleveland, Dec. 2d, 1875. Hon. Sir: I understand the smal-pox is in your city. I have a medicine I have tested till I am satisfied that it will cure and prevent the spread of the above named disease. If you wish to try it, I will furnish you the medicine, or come and administer it myself. It is perfectly harmles.

Heads of families can administer to the members if they have the medicine. I would like you to try my remedy. Respectfully yours, Dr. ———, Ontario Street.' Need we say that 'His Honor' declined to try the remedy? Letter No. 3, 'To the Board of helth, Cincinnati:' 'Gentlemen: In consequince of a outbrake and spreadin of small-pox in the city of Cincinnati, I think it my duty to point out to you the way to get rid of a sikness wich is not a tall dangerous, as generally believed. I offer you the following remedy grateue: For three hours give every hour a half a powder in black warm coffee. at the third hour apply a clyster every second hour as long as the stools shows a putrid agitashun of the bowels. For to make the clyster take the hearto marked powder, a tablespoonful of sweet oil, and a pint of boilin water; to be applied very warm. No danger for any nurse if a powder will be taken every two hours. —, M.D., — Canfield Street, Cleveland, Ohio.' The Board of Health cruelly rejected Dr. ----'s kind offer. The next letter fills us with sadness akin to pain. The writer is evidently a man of some education. We quote a few paragraphs: Letter No. 4, 'To the Mayor of Cincinnati:' 'Covington, Va., Feb. 7, 1876. Dear Sir: I learn that small-pox is prevailing to a considerable extent in your city,' etc. 'I have discovered a combination of medicinal agents that must be regarded as an absolute specific for this loathsome disease. It is perfectly safe, and will arrest the progress of the disease in any of its stages in less than twenty-four hours, establishing disquamation,' etc. 'I am a regular physician of the Allopathic School,' etc. 'There can be very little ground for fear of humbugery,' etc. '---, M. D., Covington, Alleghany Co.' The Board of Health, however, failed to have a true appreciation of the Doctor's handsome offer, and neglected to send for him. When talent is thus treated, what can mediocrity expect? We have other interesting literature of a more stunning sort, a choice collection of quack business cards, issued by graduates of 'Bunkum' and 'Windmill' Colleges; but

we refrain from publishing the same, for fear of injuring two highly prosperous (?) (see circular) institutions. Perhaps in the future the profession may call for a volume on the subject. We have the material on hand, and can give names in full, if necessary."

How they buried the King of Oun-YORO.—The Journal de Paris contains a letter from an eye-witness giving the following particulars of the atrocities committed on the occasion of the funeral of Kamrasi, king of Ounyoro, in Central Africa. An immense grave or pit capable of holding several hundred people had been dug, at the bottom of which the wives of the defunct king had been placed in the form of a ring, to be in readiness to receive upon their knees the corpse of their late tyrannical and barbarous master. Several regiments of the royal guard had been sent on the preceding night to silently surround some of the neighboring villages. The first human being, be it man, woman, or child, that made its exit from the surrounded huts was forcibly seized and carried off, and the captives entrapped in this manner conducted toward the pit prepared for the funeral. Here there commenced the most horrible scene. The limbs of these poor creatures, arms and legs, were broken by the soldiers. The lamentations and cries of despair of the victims intermingled with the shouting of the fanatical crowd, and one by one they were thrown into the gaping gulf below. Then commenced the beating of drums, the flourish of trumpets, the piercing sound of the whistle and pipe, which, together with the violent vociferations of the crowd, drowned the cries of the victims. The soil dug out of the pit the previous day was then thrown back into the monster grave. The fanatical spectators of the dismal drama, as soon as it was filled up, commenced to dance on the summit of the grave, stamping the soil down with all their might, so as to form a hard, compact layer above those buried alive. All the lamentations having ceased, nothing was left to indicate the ceremony of the abominable sepulture; the noise of the instruments had ceased also, and the assembled crowd retired, satisfied with themselves, and admiring the greatness of the king whose manes demanded such sacrifices.

A NEW MEDICAL COLLEGE (ECLECTIC?)— The Cincinnati Lancet also observes: We have occasionally to chronicle the birth of a new medical college (Eclectic), and sometimes we note the fact that pregnancy has been observed, and that parturition (of professors) may soon be expected. It is true that our motives in doing this are frequently called in question, and people claim that our interest always stands in the way of doing the parties full justice. We are all honorable and learned men, and we hope our friends of Chicago and St. Louis will welcome the new-comer in the field of medical instruction, and repeat the wish "that we had more Eclectic Colleges." "Benton, Saline County, Ark., April 24th, 1876. Mr. John M. Scudder, M. D.-My Der Sir I Drop you this Lines to Ask A favor of you. I Wish that you Wold send mee one of your Blank Diplomys such As you Use in the Coledg the reason Why i Want it is Wee Ar trying to Git up a Schoole in this Country and i Wold Like to Patern After yours i Hav seen yours And Like them And i Am Rather Parchel to Ohio Anyhow having formerly Lived there if you Will bea so kind as to send Mee one of them i Will pay all charges hoping to hear from you soon I Am yours. J. W. Hall, M. D."-Eclectic Medical Journal.

DEATH AND NO DOCTOR.—It is not unfrequent that we read in mortuary reports So and So died without the aid of a physician, but this was not the case with Joe H., who lived about five miles out of the city limits on the Beargrass Creek road. Joe was very sick and in great agony, whereupon Mrs. Joe suffered great tribulation and besought her liege lord to send for the doctor, but as Joe had no faith in physic or *physicers* he shut his ears to all her appeals. The case became desperately bad after a time, and Mrs. Joe secretly slipped out and went over to consult a neighbor who had some notoriety as a hoss doctor. The equine Esculapius did n't

like the looks of the case, but told Mrs. J. that he had some mighty good stuff for hosses' pains and it might possibly help her old man. Mrs. J. caught at the possibility, and forthwith wanted to know the quantity to be taken. The doctor said a quart was a dose for a hoss, but he reckoned a pint would do the old man. Mrs. J. hurried home and Joe took the pint of horse physic. A week passed, when the doctor happened to meet Mrs. J. at the post office. After neighborly salutations he made inquiry as to how the physic had operated on the old man. "Oh, beautifully," she replied; "it operated twicst afore he died and onct afterwards."—Avery's Home and Farm.

How we Apples Swim.—Any one who purchases the American Weekly with the idea that he is coming into possession of something deficient in cerebral development in matters pertaining to the defense of the double-back-action Phenomenon will find that as a business transaction he had better have "sold short." The Weekly's dodge is to get behind the University of Virginia and to create the impression that the action of the Convention of the Schools was aimed at this honorable medical school. The Virginia Medical Monthly goes off half-cocked on the subject after priming by the Phenomenon's organ. We can assure the Virginia Monthly that the convention entertained, as sensible men could but do, the profoundest respect for the university, and were entirely competent to tell true metal. It would not have been parliamentary to "name names," but we imagine few were in doubt as to whom the resolutions were intended for. The Phenomenon is clear upon the subject.

—The ninety-one Bobolinks flew homeward last week. What changes they must witness on their return! Most of them have no doubt been away nearly nine months! It is cruel to force one into almost perpetual exile to study medicine. We really think the Phenomenon should be put on wheels and rolled around the country to every man's door who wishes to study medicine. A couple of doctors a day would pay expenses. They

could pack the wax model in cotton, and the mannikin won't break.

DEATH OF BALARD.—Balard, the famous chemist and the discoverer of bromine, has recently died at the age of seventy-three. Balard was Professor of Chemistry at the Collége de France, a Member of the Institute, and a Knight Commander of the Legion of Honor. He had attained the highest scientific post of his country, and received all the honors which in France are conferred on eminent men of science.

Parisian Medical Students.—The number of students of medicine registered this year by the faculty of medicine is sixty-five hundred. Six millions of francs have been voted to the city of Paris for the erection and perpetual endowment of additional buildings for this renowned medical school.

—The last legislature passed an act requiring pharmacists to pass an examination after three years' study before allowing them to practice their profession. It allows Bobolinks to practice medicine and pharmacy after nine months' study!

—Dr. Ely McClellan, of this city, will address the Central Kentucky Medical Association, by invitation, on the etiology and treatment of epidemic cholera, at the next meeting, to be held in Harrodsburg on the 19th inst.

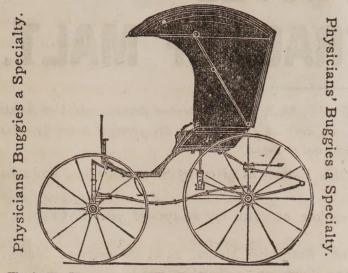
—Sir William Ferguson is dangerously ill. He is reported to be suffering from kidney disease and hypertrophy of the heart. Sir George Burrows and Dr. George Johnson are daily in attendance.

—Dr. J. T. Whitaker, after five years' service, has resigned the editorial management of The Clinic, and Dr. L. R. Longworth succeeds him. Dr. J. G. Hyndman retains his position as assistant editor of that journal.

—Dr. Joseph Carson has, on account of ill-health, resigned his professorship of Materia Medica in the University of Pennsylvania. Dr. Horatio C. Wood will succeed him.

—Ninety-one Bobolinks are reported to have taken flight at the late Commencement. The roost was well nigh emptied.

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Foreign Crackers and Farinaceous Preparations in great variety; Borden's Condensed Juice of Beef; "RACAHOUT DES ARABES," an exceedingly grateful beverage for convalescents and invalids; Foreign Wines and Liquors imported direct from place of growth; Natural Mineral Waters, such as "Congress," "Hathorn," etc.

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TROMMER'S EXTRACT OF MALT.

This Extract is prepared from the best Canada Barley Malt, by an improved process which prevents injury to its properties by excess of heat. It is less than half as expensive as the foreign extract; it is also more palatable, convenient of administration, and will not ferment.

Attention is invited to the following analysis of this Extract as given by S. H. Douglas, Professor of Chemistry University of Michigan, Ann Arbor.

TROMMER EXTRACT OF MALT CO.:-I enclose herewith my analysis of your EXTRACT OF MALT:

Malt Sugar (Glucose), 46.1; Dextrine, Hop-bitter, Extractive Matter, 23.6; Albuminous Matter, (Diastase), 2.469; Ash-phosphates, 1.712; Alkalies, .377; Water, 25.7. Total, 99.958.

In comparing the above analysis with that of the Extract of Malt of the German Pharmacopæia, as given by Hager, that has been so generally received by the profession, I find it to substantially agree with that article.

Yours truly,

SILAS H. DOUGLAS,

Prof. of Analytical and Applied Chemistry.

This invaluable preparation is highly recommended by the medical profession, as a most effective therapeutic agent for the restoration of delicate and exhausted constitutions. It is very nutritious, being rich in both muscle and fat-producing materia's.

By many American physicians, and among others, by such foreign authorities (German, French, and English) as Niemeyer, Trousseau, and Aitken, the Malt Extract is extolled in the treatment of impaired, difficult, and "irritable" digestion, loss of appetite, sick headache, chronic diarrhœa, cough, bronchitis, asthma, consumption, the debility of females, and of the aged, in retarded convalescence from exhausting diseases, and indeed most all depressing maladies, in which it has been found very sustaining and strengthening, and admirably adapted for building up and invigorating the system. It is often well-borne by the stomach when every kind of food is rejected, thus actually sustaining life.

The presence of a large proportion of Diastase renders it most effective in those forms of disease originating in imperfect digestion of the starchy elements of food.

A single dose of the Improved Trommer's Extract of Malt contains a larger quantity of the active properties of malt than a pint of the best ale or porter; and not having undergone fermentation, is absolutely free from alcohol and carbonic acid.

The dose for adults is from a dessert to a tablespoonful three times daily. It is best taken after meals, pure, or with a glass of milk, or in water, wine, or any kind of spirituous liquor. Each bottle contains One AND One HALF Pounds of the Extract Price \$1.00.

In addition to the Extract of Malt with Hops, the attention of physicians is invited to the following combinations:

IMPROVED TROMMER'S EXTRACT OF MALT, "FERRATED."

Each dose contains four grains of the Pyrophosphate of Iron. Particularly adapted to cases of Anæmia. Price \$1.00.

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Appropriate where Iron and Quinine are jointly indicated. Very beneficial in the anæmic state following autumnal fevers, in chlorosis, enlarged spleen, carbuncles, boils, &c. It is a pleasant tonic, the bitter taste being very effectually disguised. Each dose contains four grains of the Citrate of Iron and Quinia. Price \$1.50.

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Far superior to any of the "Syrups" of Hypophosphites, and invaluable in anæmia, scrofulous, tuberculous, and other cachectic conditions. In the various affections to which scrofulous children are liable, as marasmus, rachitis, caries of the spine, &c., it is very efficacious. This combination is in certain cases even more efficient in exhaustion from undue lactation than the Extract of Malt with Hops.

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The experience of the late Sir J. Y. Simpson and others in the use of this combination of salts has been fully confirmed by more recent experience. Particularly recommended in anæmia dependent upon scrofula, phthisis, cancers, the syphilitic cachexy, enlarged spleen, and in chlorosis where Iron alone has failed. Each dose contains one grain each of the Iodides of Iron and Manganese. Price \$1 50.

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Each dose contains the proper proportions of the Iodide of Calcium and Iron, and of the Chlorides and Bromides of Magnesium, Sodium and Potassium. This combination of the most potent alteratives with tonics and restoratives has been successfully employed in the different forms of disease dependent upon the "modified scrofulous diathesis;" as general perverted glandular action, disease of the bones and cartilages catarrhal affections of the eye, ear, and naso-pharyngeal mucous surfaces, eczematous and other cutaneous eruptions, in rheumatic arthritis, scrofulous rheumatism, &c. Price \$1.50.

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They have used the utmost care in investigating their pedigrees, and believe them to be entirely correct as given. They would not hesitate a moment to eliminate the most highly prized cross in any animal when satisfied of its incorrectness.

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MCFERRAN'S HAMBLETONIAN.

A bay horse, white near hind ankle, star in forehead; stands fifteen hands three inches; foaled May 13, 1868. (Bred by Charles Backman, Esq., Stony Ford, Orange County, N. Y.) Sired by Rysdyk's Hambletonian. Dam Grey Rose, by Harris's Hambletonian, by Bishop's Hambletonian, by Imported Messenger. The least informed know the fame of Rysdyk's Hambletonian, the sire of fourteen animals that have trotted two hundred and twenty heats in 2.30, including Dexter, Gazelle, Jay Gould, etc. This horse is wonderfully speedy, with a level head, and one of the best dispositions in the world.

AUGUST BELMONT.

Dark-brown bay horse, white hind heels; foaled May 22, 1870; stands fifteen hands three inches. Got by Rysdyk's Hambletonian. First dam Miss Mansor, by Jackson's Sir Archey; second dam by Westchester, son of Long Island Black Hawk; third dam by Abdallah, son of Mambrino; fourth dam by Engineer 2d (sire of Lady Suffolk), by Engineer, son of Imp. Messenger. Jackson's Sir Archey by Bay State Morgan, son of Hale's Green Mountain Morgan, son of Gifford Morgan by Woodburry Morgan: first dam by Sir Archey, son of Imp. Diomed; second dam by Industry, son of Sir Archey by Imp. Diomed.

This stud also contains thirty brood mares, descended from Imported Messenger through Rysdyk's Hambletonian, Volunteer, Messenger Duroc, Alexander's Abdallah, Aberdeen, Mambrino Chief, with crosses from Seeley's American Star, Ethan Allen, Pilot, Jr., Bashaw's Gold Dust, and the best foundations of thoroughbred blood.

The colts and fillies now on the place descending from this parentage, in form, color, disposition, and movement are all that would naturally be expected from their ancestry.

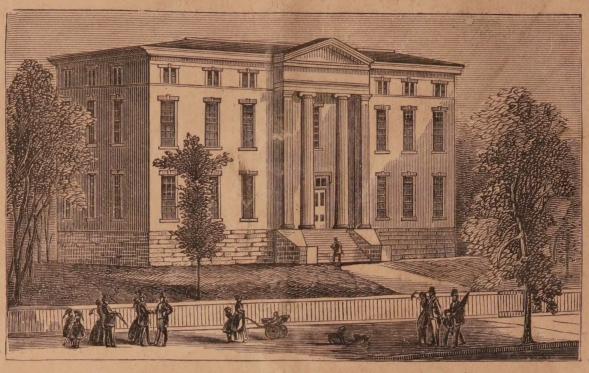
It is proved by experiment that horses of any parentage are improved in bone, muscle, and feature by the blue grass and the limestone water of Kentucky.

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No class of persons can be more interested in the horse than physicians. He is not only their daily but their hourly companion. Their bodily comfort, peace of mind, and really their efficiency depends to a great extent upon the animal which carries them in their round of practice. The produce of Hambletonian and August Belmont are especially recommended not only for speed, beauty, strength, endurance, and superb action either under saddle or in harness, but for their wonderful GOOD TEMPER AND DOCILITY. True economy in this as in all things is to get the best. Speed is not incompatible with safety, and blood tells as well upon the streets and roads as it does upon the turf. Address,

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	.Professor of Obstetrics and Diseases of Women and Children.
J. W. HOLLAND, M. D	.Professor of Materia Medica and Medical Chemistry.
	.Professor of the Science and Art of Surgery and Clinical Surgery.
R. O. COWLING, M. D	Professor of Surgical Pathology and Operative Surgery.
W. O. ROBERTS, M. D	

FEES.—Professors' Tickets, in full, \$50.00; Matriculation Fee, \$5.00; Demonstrator's Ticket, \$10.00; Graduation, \$30.00; Hospital Ticket (required by City), \$5.00.

The Regular Session will commence on the first Monday in October, and continue until the 1st of March.

A Preliminary Course of Lectures, free to all Students, will commence on the first Monday in September, and continue till the opening of the Regular Term.

J. M. BODINE, M. D., Dean of the Faculty.

For the Annual Circular, containing full particulars, address

J. W. HOLLAND, M. D., Sec'y of Faculty, Corner Fifth and Walnut Streets.

SPRING AND SUMMER SESSION OF 1876.

The Spring and Summer Session of 1876 in the Medical Department of the University of Louisville will commence on March 7th and continue till July 1st. The following Courses will be given by the REGULAR FACULTY, assisted by Drs. W. O. Roberts, H. A. Cottell, G. H. Anderson, W. H. Long, and R. B. Gilbert:

On Venereal Diseases and Diseases of the Skin; Ophthalmic and Aural Diseases; Clinical Diseases of the Chest, and Physiology; Public Hygiene; Clinical Diseases of Women; Clinical Surgery; Materia Medica; Surgery; Practice of Medicine; Anatomy; Chemistry; Obstetrics; and Diseases of Children.

Didactic Lectures will be given on the Specialties of Medicine and Surgery, but the essential feature of this course will be CLINICAL INSTRUCTION and RECITATIONS from the text-books, it being the design of the Faculty to give the student advantages much superior, as has been demonstrated, to those obtained by ordinary office instruction.

The University Dispensary, situated upon the college grounds, supported by the Faculty and under its exclusive control, is the only institution of the kind in the city of Louisville which has existed for any number of years. It has obtained the confidence of the sick poor of this city, and its rooms, especially during the milder months, are daily crowded with patients illustrating all varieties of disease.

The Faculty have also access to the Louisville City Hospital, an institution which contains more than two hundred beds, and the Hospital of SS. Mary and Elizabeth. From these sources an inexhaustible supply of clinical material is obtained.

Advanced students will be given obstetrical cases and cases in out-door practice to attend.

The Spring and Summer Course of the University is designed to be supplementary to the Regular Winter Course.

Attendance upon it is voluntary and does not count as a session, but students who attend it are furnished with certificates which will be taken as additional evidence of proficiency in candidates applying for the Medical Degree of the University.

The Fee for the Full Course is \$25.00, and entitles the holder to his Matriculation Ticket for the ensuing Regular Winter Session.

For further information address

W. O. ROBERTS, M. D., Dean of University Summer School, 263 West Walnut Street, LOUISVILLE.